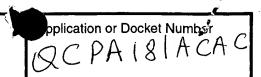
PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000



CLAIMS AS FILED - PART I (Column 1) (Column 2)							-	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			5				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	· 710.00
то	TAL CHARGEA	BLE CLAIMS	5 minus 20= * %				X\$ 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS	3 minus 3 = * 3			A .	Ī	X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT			İ	+135=		OR	+270=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			L	TOTAL		OR	TOTAL	710.07	
CLAIMS AS AMENDED - PART II											OTHER	
		(Column 1)	Al. of the Contract of the Con	(Colu		(Column 3)		SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW N	Total	· 23	Minus	** 2	0	= 3		X\$ 9=		OR	X\$18=	54
AME	Independent	. 5	Minus		3	= 2		X40=		OR	X80=	168
L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDEN	I CLAIM		Ī	+135=		OR	+270=	
							L	TOTAL		ام	TOTAL ADDIT. FEE	BAL
ADD (Column 1) (Column 2) (Column 3)											ADDII. FEE	Z
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		╹	+135=		OR	+270=	
							L	TOTAL		OD	TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	Α	ADDIT. FEE	-		ADDIT. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR.	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		I	+135=			+270=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+135=		OR	TOTAL	
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001 9/85/455									5			
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE O			OR	OTHER THAN SMALL ENTITY			
TOTAL CLAIMS							RAT	E I	FEE	7	RATE	FEE
FOR ICEB			NUMBER	FILED	NUME	NUMBER EXTRA		FEE 3	70.00	OR	BASIC FEE	
TOTAL CHARGEABLE CLAIMS			\mathcal{QB} mir	nus 26 ≝	*			=		OR	X\$18=	
INI	DEPENDENT C	LAIMS	5 minus =		*	* /-		=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT						+140	=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA			OR	TOTAL		
	C				10	OTHER	THAN					
	II.	(Column 1)	(i) • Marie and	(Colur		(Column 3)	SMAI	L EN	TITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATI	≣ TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**	=		X\$ 9	=		OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	CLAIM	-	X42=			OR	X84=	
L	TINOTPILOL	INTATION OF MIC	DETIFIE DET	EINDEINI	CLAIN		+140	=.		OR	+280=	
						TOT ADDIT, F			OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)									• ′	ADDIT: I EE	
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=	=		OR	X\$18=	
AME	Independent	*	Minus	***	CLAINA	=	X42=			OR	X84=	
<u></u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+140=			OR	+280=	
							TOT. ADDIT. FI			OR .	TOTAL ADDIT. FEE	
		(Column 1)		(Colun		(Column 3)	7,0011.11			,	NODII.I EL	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	RATE	TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
AME	Independent	* ENTATION OF MU	Minus	***	CLAIM	=-	X42=			OR	X84=	
	TINOTFICOL	INTATION OF MIC	CTIPLE DEF	CINDEIN	CLAIN		+140=			OR	+280=	
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						TOTA	AL .			TOTAL	
***	If the "Highest Nu	mber Previously Par ober Previously Par	id For" IN THIS	S SPACE is	less tha	n 3, enter "3."	ADDIT. FE				ADDIT. FEE	

lication or Docket Number

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND									
1 Date of Request: 7-28-03 2 Serial/Patent # 09/851.655									
3 Pl€	ease refund the following fee(s)	4 PAPER 5 DATE NUMBER FILED		6 AMOUNT					
	Filing			\$					
	Amendment			\$					
X	Extension of Time	12	7/21/03	\$ 930 00					
	Notice of Appeal/Appeal			\$					
	Petition			\$					
	Issue			\$					
	Cert of Correction/Terminal Disc.			\$					
	Maintenance			\$					
	Assignment			\$					
	0ther			\$					
		7 TOTAL 2 OF REF	\$ 930 00						
		8 TO BE REFUNDED BY:							
10 RE.	ASON:	Treasury Check							
	Overpayment	Credit Deposit A/C #:							
Duplicate Payment 9 17 00 26									
X	No Fee Due (Explanation):								
	(innecessary								
11 REFUND REQUESTED BY:									
TYPED/PRINTED NAME: WAN LAYMON TITLE: Pld. Evan.									
SIGNATURE: War Jung PHONE:									
OFFICE:									
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: DATE: 7/29/63									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B